## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT # P03000109406** 

ANGIO INVESTMENTS INC



**FILED** Jan 31, 2008 08:00 AN Secretary of State

Applied For

Not Applicable

Principal Place of Business

Mailing Address

13337 SW 88 AVE MIAMI, FL 33176

13337 SW 88 AVE MIAMI, FL 33176



DO NOT WRITE IN THIS SPA	CE
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CR2E034 (11/05) No Chg-P 01242008

4. FEI Number 35-2183974

\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GAZARIAN, ANA 13337 SW 88 AVE

## DO NOT WRITE

MIAMI, FL 33176			IN THIS SPACE				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P GAZARIAN, ANA 13337 SW 88 AVE MIAMI, FL 33176	TORS			U00000808752 02/07/08-80061-017 150.00		
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	,			_	NOT WRITE THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		156. 4			10 Florida Statutes. I further certify that the information		

Independent of the information supplied with this filing does not quality for the exemptions contained in Chapter 119. Filinda Statutes. Fluther certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under outh; that I am an officer or director of the corporation or the receiver of related to provide this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNING OFFICER OF DIRECTOR

Daytime Phone #